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10602 U.S. PTO
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Guy E. Beardsley
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Guy E. Beardsley
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Box SEQ

09/827854
04/05/01

UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. § 1.53(b)

| | |
|------------------------|---|
| Attorney Docket Number | 07180/004003 |
| Applicant | Vassilis I. Zannis and Kyriakos E. Kypreos |
| Title | COMPOUNDS AND METHODS FOR LOWERING CHOLESTEROL LEVELS WITHOUT INDUCING HYPERTRIGLYCERIDEMIA |

PRIORITY INFORMATION:

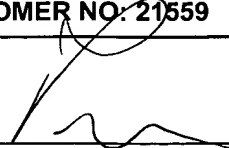
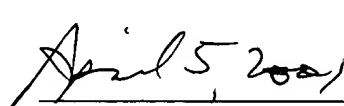
This application is a continuation-in-part of and claims priority from United States patent application 09/679,088, filed October 4, 2000.

SMALL ENTITY STATUS:

☒ Applicant claims small entity status under 37 C.F.R. § 1.27.

APPLICATION ELEMENTS:

| | |
|---|-----------|
| Cover sheet | 1 page |
| Specification | 41 pages |
| Claims | 7 pages |
| Abstract | 1 page |
| Drawings | 20 sheets |
| Combined Declaration and POA, which is: <input checked="" type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input type="checkbox"/> A copy from prior application [**SERIAL NUMBER**] and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein. | 3 pages |
| Submission of Sequence Statement | 1 page |
| Sequence Statement | 2 pages |
| Sequence Listing on Paper | 14 pages |
| Sequence Listing on Diskette | 1 disk |

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|---|---|
| Small Entity Statement, which is: <input type="checkbox"/> A copy from prior application [**SERIAL NUMBER**] and such small entity status is still proper and desired. | 0 pages |
| Preliminary Amendment | 0 pages |
| IDS | 2 pages |
| Form PTO 1449 | 4 pages |
| Form PTO 1449 (copy) | 5 pages |
| Cited References | 0 references |
| Recordation Form Cover Sheet and Assignment | 0 pages |
| English Translation | 0 pages |
| Certified Copy of Priority Document | 0 pages |
| Return Receipt Postcard | 1 |
| FILING FEES: | |
| Basic Filing Fee: \$355 | \$355.00 |
| Excess Claims Fee: $49 - 20 = 29 \times \$9$ | \$261.00 |
| Excess Independent Claims Fee: $6 - 3 = 3 \times \$40$ | \$120.00 |
| Multiple Dependent Claims Fee: \$135 | \$0.00 |
| Total Fees: | \$736.00 |
| <input checked="" type="checkbox"/> Enclosed is a check for \$736.00 to cover the total fees. <input type="checkbox"/> Charge [**AMOUNT**] to Deposit Account No. 03-2095 to cover the total fees. <input type="checkbox"/> The filing fee is not being paid at this time. <input checked="" type="checkbox"/> Please apply any other charges, or any credits, to Deposit Account No. 03-2095. | |
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|  Paul T. Clark |  Date |

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